

Application # Form 1 of 2



Water Pollution Control Authority
50 River Road, Stafford Springs, CT 06076

phone: Billing (860) 684-3642 Permits (860) 684-3642 Fax (860) 684-1181

Application for New Sewer Connection, Sewer Repair, FOG, or Disconnect

*To be Filled Out by **PROPERTY OWNER***

Owner: _____

Permanent Address of Owner: _____

Email of Owner: _____

Owner Phone: _____

Location of property to be developed: (House/Lot) _____

Sewer Connection: New () Repair/Compliance () FOG () Disconnect ()

Type of Use: Residential: One Family (), 2 Family (), 3 Family (), 4 + ()

Commercial () Industrial ()

This is a connection for: one building () or more buildings _____

The undersigned agrees to abide by all provisions of laws, ordinances, and rules and regulations pertaining to WPCA sewers which are now in force or may be adopted in the future, to maintain the building sewer at no expense to the Town, and to notify the Authority when the building sewer is ready for inspection and connection to the public sewer, but before any portion of the work is covered. Plans and specifications of the proposed building sewer are attached hereunto as Exhibit "A" (Refer to regulations for sets required).

Owner Signature: _____

Date: _____

*To be Filled Out by **CONTRACTOR***

Contractor Name: _____

Contractor Company: _____

Business Address of Contractor: _____

Business Email of Contractor: _____

Contractor Phone: _____

License No: _____

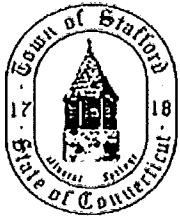
Contractor's statement: I have thoroughly investigated the existing plumbing at this location and have disconnected and properly diverted all roof drains, yard drains, cellar drains, cooling water or other unauthorized connections to the sewer. I further certify that any necessary plumbing installation has been installed and does comply to the applicable codes of the Town of Stafford and the State of Connecticut.

Contractor Signature: _____

Date: _____

WPCF Superintendent: _____

Date: _____



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Fees	
Permit Type - I, II, III _____	As-Built Fees: \$ _____
Permit Type - IV _____	Other Fees: \$ _____
Impact Fees: \$ _____	Permit Fees: \$ _____
As-Built Fee is refunded only after the building sewer is installed to the satisfaction of the W.P.C.A. and As-Built drawing received.	
Total fees Due: \$ 	Engineer Approval Needed: yes () no () n/a ()
Type of Payment: Cash () or Check ()	Payment Received: _____
Owner Signature: _____	Date: _____
WPCF Superintendent: _____	Date: _____
WPCA Administrator: _____	Date: _____
Project Installation Observation Record - W.P.C.A Staff	
WPCF Superintendent Approval: _____	W.P.C.A. Approval: _____
Engineer Approval: _____	Pump-Up inspected: _____
Final Observation & All Work Approved: _____	
Application is good for one year from date of approval, as outlined in the Sewer Use Regulations. If sewer is not constructed in this time, a new application and associated fees are required.	
Contractor Signature: _____	Date: _____
WPCF Superintendent: _____	Date: _____



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As-Built Plan

Location _____
 House or Lot Number _____

Property Owner _____
 Phone Owner _____
 Contractor _____
 Phone Contractor _____

To be filled out by W.P.C.A. Staff

Inspector: _____
 Date: _____
 Application #: _____

New Sewer Connection _____
 Repair of Existing System _____
 Disconnect _____

The W.P.C.A. shall be supplied with appropriate, acceptable "As-Built" drawings that shall be to scale, with horizontal and vertical dimensions, showing the location of the service lines with respect to the building foundation, the existing sanitary sewer, bends, cleanouts, and any other relevant land markings.

North Direction
use arrow

Notes:

#	1	2	3	4	5	6	7	8
Distance from building corner "A"								
Distance from building corner "B"								
Distance from building corner "C"								



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Application for the Waiver of FOG Interceptor Requirements

To be Filled out by the Property Owner

Owner: _____

Owner's Address: _____

Owner's Phone: _____

Owner's Email: _____

Establishment Name: _____

Establishment Address: _____

Reason for Requesting a Waiver:

I, the undersigned, certify that I have had access to the Stafford WPCA's Regulations for the Installation and Connection of Building Sewers and for the Use of Public Sewers. I recognize that, as a representative of the above-named establishment, I am responsible for complying with these regulations, and for reading and understanding their content. I understand that the Superintendent has final say in approving or denying this application for waiver.

Signature: _____ Date: _____

For Office Use Only

Date Received: _____

Business Manager's Signature: _____

Approved by Superintendent: Yes No

Superintendent's Signature: _____

Date Approved: _____